

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001731

FILED  
Jan 13, 2010  
Secretary of State

**Entity Name:** FISHHAWK YOUTH SPORTS ASSOCIATION INC.

**Current Principal Place of Business:**

15028 EAGLERISE DRIVE  
LITHIA, FL 33547 US

**New Principal Place of Business:**

**Current Mailing Address:**

15028 EAGLERISE DRIVE  
LITHIA, FL 33547 US

**New Mailing Address:**

FEI Number: 20-8440127

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: POWERS, SCOTT  
Address: 15028 EAGLERISE DRIVE  
City-St-Zip: LITHIA, FL 33547

Title: T  
Name: MACE, JOHN  
Address: 15020 EAGLERISE DRIVE  
City-St-Zip: LITHIA, FL 33547

Title: V  
Name: CEREN, MATT  
Address: 15314 VIREOGLLEN LN  
City-St-Zip: LITHIA, FL 33547

Title: D  
Name: CEREN, MATT  
Address: 15314 VIREOGLLEN LN  
City-St-Zip: LITHIA, FL 33547

Title: S  
Name: STALLINGS, GREG  
Address: 5913 JEAGERGLEN DR  
City-St-Zip: LITHIA, FL 33547

Title: D  
Name: STALLINGS, GREG  
Address: 5913 JEAGERGLEN DR  
City-St-Zip: LITHIA, FL 33547

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN MACE

T

01/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date